

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the linesUnited Association Political Education Committee (United Association of Journey-
men and A

ADDRESS (number and street)

Three Park Place

☐Check if different
than previously
reported. (ACC)

Annapolis

MD

21401

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00012476

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2008

through

08

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Assistant Treasurer Patrick R. Perno

Signature of Treasurer

Electronically Filed by Assistant Treasurer Patrick R. Perno

Date

10

08

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 21

Write or Type Committee Name

United Association Political Education Committee (United Association of Journeymen and A

Report Covering the Period:

From:

M M
0 8D D
0 1Y Y Y Y
2 0 0 8

To:

M M
0 8D D
3 1Y Y Y Y
2 0 0 8

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 Y Y Y Y 2008 | | 1410554.13 |
| (b) Cash on Hand at Beginning of Reporting Period | 1443854.82 | |
| (c) Total Receipts (from Line 19) | 241578.79 | 1273932.28 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 1685433.61 | 2684486.41 |
| 7. Total Disbursements (from Line 31) | 160289.28 | 1159342.08 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 1525144.33 | 1525144.33 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

3 / 21

Write or Type Committee Name

United Association Political Education Committee (United Association of Journeymen and A

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 0 | 8 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 8 | 3 | 1 | 2 | 0 | 0 | 8 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 200.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 176463.41 | 1179930.25 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 176463.41 | 1180130.25 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 176463.41 | 1180130.25 |
| 12. Transfers From Affiliated/Other Party Committees | 61882.00 | 73145.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 2500.00 | 15000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 733.38 | 5657.03 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 241578.79 | 1273932.28 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 241578.79 | 1273932.28 |

DETAILED SUMMARY PAGE

of Disbursements

4 / 21

FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share..... | 0.00 | 0.00 | |
| (ii) Non-Federal Share..... | 0.00 | 0.00 | |
| (b) Other Federal Operating Expenditures..... | 0.00 | 10702.80 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤ | 0.00 | 10702.80 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 61500.00 | 780600.00 | |
| 24. Independent Expenditure (use Schedule E) | 56289.28 | 56289.28 | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 | |
| 26. Loan Repayments Made..... | 0.00 | 0.00 | |
| 27. Loans Made..... | 0.00 | 0.00 | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | |
| (b) Political Party Committees | 0.00 | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 | |
| 29. Other Disbursements..... | 42500.00 | 311750.00 | |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 160289.28 | 1159342.08 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 160289.28 | 1159342.08 | |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 21

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 176463.41 | 1180130.25 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 176463.41 | 1180130.25 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 10702.80 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 10702.80 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

CALIFORNIA STATE PIPE TRADES COUNCIL VOLUNTARY POLITICAL ACTION FUND

Mailing Address 1123 L Street

City

Sacramento

State

CA

Zip Code

95814

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: SA12.12702

Amount of Each Receipt this Period

25000.00

Transfer

B.

Full Name (Last, First, Middle Initial)

PIPEFITTERS LOCAL #533 VOLUNTEER POLITICAL FUND

Mailing Address 8600 HILLCREST ROAD

City

KANSAS CITY

State

MO

Zip Code

64138

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA12.12703

Amount of Each Receipt this Period

15000.00

Transfer

C.

Full Name (Last, First, Middle Initial)

PIPEFITTERS POLITICAL ACTION COMMITTEE

Mailing Address 30100 NORTHWESTERN HWY

City

FARMINGTON HILLS

State

MI

Zip Code

48334

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 8

Transaction ID: SA12.12704

Amount of Each Receipt this Period

5000.00

Transfer

SUBTOTAL of Receipts This Page (optional)

45000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

PLUMBERS AND STEAMFITTERS LOCAL 467 VOLUNTARY FEDERAL POLITICAL ACTION FUND

Mailing Address 1519 ROLLINS ROAD

City

BURLINGAME

State

CA

Zip Code

94010

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Transaction ID: SA12.12705

Amount of Each Receipt this Period

15000.00

Transfer

B.

Full Name (Last, First, Middle Initial)

PLUMBERS LOCAL 519 POLITICAL ACTION COMMITTEE

Mailing Address 14105 N.W. 58TH COURT

City

MIAMI LAKES

State

FL

Zip Code

33014

FEC ID number of contributing federal political committee.

C

C00143362

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8237.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 8

Transaction ID: SA12.12700

Amount of Each Receipt this Period

1882.00

Transfer

SUBTOTAL of Receipts This Page (optional)

16882.00

TOTAL This Period (last page this line number only)

61882.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input checked="" type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

JOHN H ADLER

Mailing Address 51 CAMEO DRIVE

City

CHERRY HILL

State

NJ

Zip Code

08003

FEC ID number of contributing
federal political committee.**C** H8NJ03156

Name of Employer

Occupation

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 2 | 8 | | 2 | 0 | 0 | 8 |

Transaction ID: SA16.11190

Amount of Each Receipt this Period

2000.00

Refund

B.

Full Name (Last, First, Middle Initial)

ARLEN SPECTER

Mailing Address 4111 TIMBER LANE

City

PHILADELPHIA

State

PA

Zip Code

19122

FEC ID number of contributing
federal political committee.**C** S6PA00100

Name of Employer

Occupation

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 1 | 5 | | 2 | 0 | 0 | 8 |

Transaction ID: SA16.11189

Amount of Each Receipt this Period

500.00

Refund

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 1501 Pennsylvania Avenue, NW

City

Washington

State

DC

Zip Code

20013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5657.03

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: SA17.11188

Amount of Each Receipt this Period

733.38

Interest for August

SUBTOTAL of Receipts This Page (optional)

733.38

TOTAL This Period (last page this line number only)

733.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 21

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

| | | | | | |
|---|--|--|--|---|--|
| A. | Full Name (Last, First, Middle Initial) MARION BERRY | | | Transaction ID: SB23.11232 | |
| | Mailing Address PO BOX 306 | | | Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8 | |
| | City GILLET | State AR | Zip Code 72005 | Amount of Each Disbursement this Period 5000.00 | |
| | Purpose of Disbursement Transfer | | <input type="checkbox"/> Category/ Type | | |
| | Candidate Name MARION BERRY | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: AR District: 01 | | | | | |
| B. | Full Name (Last, First, Middle Initial) Nancy Boyda for Congress | | | Transaction ID: SB23.11237 | |
| | Mailing Address 5081/2 SW 10th Street | | | Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8 | |
| | City Topeka | State KS | Zip Code 66612 | Amount of Each Disbursement this Period 5000.00 | |
| | Purpose of Disbursement Transfer | | <input type="checkbox"/> Category/ Type | | |
| | Candidate Name Nancy Boyda for Congress | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: KS District: 02 | | | | | |
| C. | Full Name (Last, First, Middle Initial) DONALD R JR CRAVINS | | | Transaction ID: SB23.11234 | |
| | Mailing Address 1034 NORTHCROSS LANE | | | Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8 | |
| | City OPELOUSAS | State LA | Zip Code 70570 | Amount of Each Disbursement this Period 5000.00 | |
| | Purpose of Disbursement Transfer | | <input type="checkbox"/> Category/ Type | | |
| | Candidate Name DONALD R JR CRAVINS | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | | | |
| State: LA District: 07 | | Special-Primary | | | |

SUBTOTAL of Disbursements This Page (optional)**15000.00****TOTAL** This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

A.

Full Name (Last, First, Middle Initial)

BILL GILLESPIE

Mailing Address PO BOX 820

City
TYBEE ISLAND

State
GA

Zip Code
31328

Purpose of Disbursement
Transfer

Candidate Name
BILL GILLESPIE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 01

Transaction ID: SB23.11245

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)

STEVEN LESLIE KAGEN

Mailing Address 1712 SOUTH MASON STREET

City
APPLETON

State
WI

Zip Code
54914

Purpose of Disbursement
Transfer

Candidate Name
STEVEN LESLIE KAGEN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: SB23.11244

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

LINDA KETNER

Mailing Address 12 CHURCH STREET

City
CHARLESTON

State
SC

Zip Code
29401

Purpose of Disbursement
Transfer

Candidate Name
LINDA KETNER

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 01

Transaction ID: SB23.11230

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

A.

Full Name (Last, First, Middle Initial)

ANN KIRKPATRICK

Mailing Address PO Box 993

City
Prescott

State
AZ

Zip Code
86302

Purpose of Disbursement
Transfer

Candidate Name
ANN KIRKPATRICK

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 01

Transaction ID: SB23.11238

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

ANN KIRKPATRICK

Mailing Address PO Box 993

City
Prescott

State
AZ

Zip Code
86302

Purpose of Disbursement
Transfer

Candidate Name
ANN KIRKPATRICK

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 01

Transaction ID: SB23.11240

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

ROBERT JAMES LORD

Mailing Address 4340 EAST INDIAN SCHOOL STE 21-502

City
PHOENIX

State
AZ

Zip Code
85018

Purpose of Disbursement
Transfer

Candidate Name
ROBERT JAMES LORD

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 03

Transaction ID: SB23.11241

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

| | | | | | | | | | | | |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | | 30b |

United Association Political Education Committee (United Association of Journeymen and Apprentices)

MM / DD / YYYY

State: AZ District: 03

MM / DD / YYYY

State: MN District: 03

State: AR District: 04

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 21

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and A

A.

Full Name (Last, First, Middle Initial)

JIM SLATTERY

Mailing Address PO BOX 4486

City
TOPEKA

State
KS

Zip Code
66604

Purpose of Disbursement
Transfer

Candidate Name
JIM SLATTERY

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.11236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

61500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Timothy Cailon | Transaction ID: SB29.11223 Date of Disbursement |
| Mailing Address 700 Center Street | <div> <div>08</div> <div>05</div> <div>2008</div> </div> |
| City Warren State OH Zip Code 44483 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Glenn Freeman | Transaction ID: SB29.11200 Date of Disbursement |
| Mailing Address 435 S. Stoll | <div> <div>08</div> <div>05</div> <div>2008</div> </div> |
| City Lansing State MI Zip Code 48917 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Sherry Freeman | Transaction ID: SB29.11221 Date of Disbursement |
| Mailing Address 435 S. Stoll | <div> <div>08</div> <div>05</div> <div>2008</div> </div> |
| City Lansing State MI Zip Code 48917 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

A.

Full Name (Last, First, Middle Initial)

Brad Grabill

Mailing Address 2447 Orlando Central Pkwy

City Orlando State FL Zip Code 32809

Purpose of Disbursement

Travel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.11196

Date of Disbursement

08 / 05 / 2008

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Donald Ham

Mailing Address PO Box 20474

City Tallahassee State FL Zip Code 32316

Purpose of Disbursement

Travel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.11198

Date of Disbursement

08 / 05 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

James Hart

Mailing Address 8604 Cobblestone Point

City Boynton Bch State FL Zip Code 33437

Purpose of Disbursement

Travel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.11204

Date of Disbursement

08 / 05 / 2008

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Linton Hartley | Transaction ID: SB29.11210 Date of Disbursement |
| Mailing Address 2447 Orlando Central Pkwy | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Orlando State FL Zip Code 32807 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) William Horsman | Transaction ID: SB29.11225 Date of Disbursement |
| Mailing Address 117 Monterey Way | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Royal Palm Beach State FL Zip Code 37809 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Jimmy Johnson | Transaction ID: SB29.11206 Date of Disbursement |
| Mailing Address 8354 Three Creek Blvd | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Jacksonville State FL Zip Code 32220 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 21

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) John A. Lindstrom | Transaction ID: SB29.11208 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 2616 SW Bear Paw Trail | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code Palm City FL 34990 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense | <table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Richard A. Lord | Transaction ID: SB29.11218 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 2214 John Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code Pasadena TX 77502 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense | <table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Larry J. Mazzola | Transaction ID: SB29.11209 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 3060 24th Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code San Francisco CA 94132 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense | <table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Glenn McIntosh | Transaction ID: SB29.11202 Date of Disbursement |
| Mailing Address 4923 W. Cypress Street | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Tampa State FL Zip Code 33607 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Ken Pechette | Transaction ID: SB29.11216 Date of Disbursement |
| Mailing Address 2704 Oak Beach Road | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Port Austin State MI Zip Code 48467 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Samantha Stobb | Transaction ID: SB29.11219 Date of Disbursement |
| Mailing Address 1223 Park Road | <div> <div>MM / DD / YY</div> <div>08 / 05 / 2008</div> </div> |
| City Espyville State PA Zip Code 16424 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel expense | <div>2500.00</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 21

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeyman and Apprentices)

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Kathy Terven | Transaction ID: SB29.11214 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 9371 Orion Drive | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Bloomington State IL Zip Code 61705 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense | <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Oliver Winn | Transaction ID: SB29.11212 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 278 South Kings Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Ormond Beach State FL Zip Code 32174 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel expense | <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

42500.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 21 / 21

FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) United Association Political Education Committee (United Association of Journeymen and A | | FEC IDENTIFICATION NUMBER ▼ C C00012476 | |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | | | |
| Full Name (Last, First, Middle, Initial) of Payee Clear Images | | Date M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8 | |
| Mailing Address 121 11th Street | | Amount 56289.28 | |
| City Toledo | | Transaction ID: SE.11499 | |
| State OH | | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential | |
| Zip Code 43604 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Purpose of Expenditure Billboards, signs, etc | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 | |
| Category/ Type | | | |
| Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA | | | |
| Calendar Year-To-Date Per Election for Office Sought | | 56289.28 | |

| | |
|--|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures | 56289.28 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures | 56289.28 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Assistant Treasurer Patrick R. Perno
Signature

Date M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0